<b>a</b> Employee's SSN 358-55-1594	<b>b</b> Employer identification n	umber (EIN) 81-0837	7404	OMB No. 1545-0008
C Employer's name, address, and ZIP code SPATE BUSINESS SOLUTIONS LLC	<b>1</b> Wgs, tips, other compn 73982.30	2 Fed inc tax withheld 11783.00	<b>3</b> Social security wages 73982.30	Form <b>W-2</b>
38345 W 10 MILE RD. STE 385	4 SS tax withheld 4586.90	5 Medicare wages & tips 73982.30	6 Medicare tax withheld 1072.74	Wage and Tax
FARMINGTON HILLS MI 48335	7 Social security tips		9	Statement
d Control number	<b>10</b> Depdnt care benefits	11 Nonqualified plans 1	2a	2020
Employee's name, address, and ZIP code Suff.	13 Statutory employee.	<b>14</b> Other <b>1</b>	2b	
LAXMIPRASANNA TUMMALA		1	2c	Copy B To Be Filed with Employee's FEDERAL
4964 WILLIAMSTOWN BLVD	Retirement plan			Tax Return This information is being
LAKELAND FL 33810	Third-party sick pay	1	2d	furnished to the Internal Revenue Service.
15         State         Employer's state ID number         16         State wages, tips, etc         1           IN         0162828918         001         73982.30         -	7 State income tax 2389.59	<b>18</b> Local wages, tips, etc 73982.30	<b>19</b> Local income tax	<b>20</b> Locality name 7 <u>IN-HAM</u>

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Department of the Treasury - IRS

<b>a</b> Employee's SSN 358-55-1594	<b>b</b> Employer identification n	OMB No. 1545-0008		
<b>C</b> Employer's name, address, and ZIP code SPATE BUSINESS SOLUTIONS LLC	<b>1</b> Wgs, tips, other compn 73982.30	2 Fed inc tax withheld 11783.00	<b>3</b> Social security wages 73982.30	Form <b>W-2</b>
38345 W 10 MILE RD. STE 385	<ul> <li>4 SS tax withheld</li> <li>4586.90</li> <li>7 Social security tips</li> </ul>	73982.30	6 Medicare tax withheld 1072.74	Wage and Tax
FARMINGTON HILLS MI 48335			-	Statement
d Control number	10 Depdnt care benefits	11 Nonqualified plans 1	2a	2020
e Employee's name, address, and ZIP code Suff.	13	14 Other 1	2b	
LAXMIPRASANNA TUMMALA 4964 WILLIAMSTOWN BLVD	Statutory employee .	1	2c	Copy 2 To Be Filed With Employee's State, City, or Local
LAKELAND FL 33810	Third-party sick pay	1	2d	Income Tax Return.
15         State         Employer's state ID No.         16         State wages, tips, etc         17           IN         0162828918         001         73982.30         73982.30         14		<b>18</b> Local wages, tips, etc 73982.30	<b>19</b> Local income tax 813.77	<b>20</b> Locality name

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r	T			
<b>a</b> Employee's SSN 358-55-1594	<b>b</b> Employer identification n	<b>b</b> Employer identification number (EIN) 81-0837404		
<b>C</b> Employer's name, address, and ZIP code SPATE BUSINESS SOLUTIONS LLC	This information is being furr other sanction may be impos	ligence penalty or		
STATE DOSTRESS BOLOTIONS LLC	1 Wgs, tips, other compn	2 Fed inc tax withheld	3 Social security wages	14/ 0
	73982.30	11783.00	73982.30	Form <b>W-2</b>
38345 W 10 MILE RD. STE 385	4 SS tax withheld	5 Medicare wages & tips	6 Medicare tax withheld	Wage and
	4586.90	73982.30	1072.74	<u> </u>
FARMINGTON HILLS MI 48335	7 Social security tips	8 Allocated tips	9	Тах
d Control No.	1			Statement
	10 Depdnt care benefits	11 Nonqualified plans	12a	
				2020
e Employee's name, address, and ZIP code Suff.	13	14 Other	12b	
	Statutory employee.			
LAXMIPRASANNA TUMMALA			12c	Copy C For
4964 WILLIAMSTOWN BLVD	Retirement plan			EMPLOYEE'S RECORDS.
		-	12d	(See Notice to
LAKELAND FL 33810	Third-party sick pay		120	Employee.)
	7 State income tax	18 Local wages, tips, etc	19 Local income tax	20 Locality name
IN 0162828918 001 73982.30	2389.59	73982.30	813.77	IN-HAM
F ] F				1

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